



FLWEMS Paramedic Medication Information For:
PROMETHAZINE HYDROCHLORIDE
(Phenergan)

(proh-METH-ah-zeen)

Pregnancy Category

C **Parenteral:** Anergan 50 Phenergan **Suppositories:** Phenergan **Syrup:** Phenergan Fortis Phenergan Plain **Tablets:** Phenergan PMS Promethazine* (Rx)

Classification

Antihistamine, phenothiazine-type

See Also

See also *Antihistamines* and *Antiemetics*.

Action/Kinetics

Antiemetic effects are likely due to inhibition of the CTZ. Effective in vertigo by its central anticholinergic effect which inhibits the vestibular apparatus and the integrative vomiting center as well as the CTZ. May cause severe drowsiness. Onset, PO, IM, PR: 20 min; IV: 3-5 min. Duration, antihistaminic: 6-12 hr; sedative: 2-8 hr. Slowly eliminated through urine and feces.

Uses

PO and PR for prophylaxis and treatment of motion sickness. Prophylaxis of N&V due to anesthesia or surgery (also postoperatively). Pre- or postoperative sedative, obstetric sedative. Hypersensitivity reactions, including perennial and seasonal allergic rhinitis, vasomotor rhinitis, allergic conjunctivitis, urticaria, angioedema, allergic reactions to blood or plasma, dermatographism. Adjunct in the treatment of anaphylaxis or anaphylactoid reactions. Adjunct to analgesics for postoperative pain. IV with meperidine or other narcotics in special surgical procedures as bronchoscopy, ophthalmic surgery, or in poor-risk clients.

Contraindications

Lactation. Comatose clients, CNS depression due to drugs, previous phenothiazine idiosyncrasy, acutely ill or dehydrated children (due to greater susceptibility to dystonias). Children up to 2 years of age. SC or intra-arterial use due to tissue necrosis and gangrene.

Special Concerns

Safe use during pregnancy has not been established. Use in children may cause paradoxical hyperexcitability and nightmares. Geriatric clients are more likely to experience confusion, dizziness, hypotension, and sedation.

Additional Side Effects

Leukopenia and agranulocytosis (*especially if used with cytotoxic agents*).

How Supplied

Injection: 25 mg/mL, 50 mg/mL; *Suppository:* 12.5 mg, 25 mg, 50 mg; *Syrup:* 6.25 mg/5 mL, 25 mg/5 mL; *Tablet:* 12.5 mg, 25 mg, 50 mg

Dosage

•Suppositories, Syrup, Tablets *Hypersensitivity reactions.*

Adults: 12.5 mg q.i.d. before meals and at bedtime (or 25 mg at bedtime if needed). Pediatric over 2 years: 0.125 mg/kg (3.75 mg/m²) q 4-6 hr; 0.5 mg/kg (15 mg/m²) at bedtime if needed; or, 6.25-12.5 mg t.i.d. (or 25 mg at bedtime if needed).

Antiemetic.

Adults: 25 mg (usual); 12.5-25 mg q 4-6 hr as needed. Pediatric, over 2 years: 0.25-0.5 mg/kg (7.5-15 mg/m²) q 4-6 hr as needed (or 12.5-25 mg q 4-6 hr).

Sedation.

Adults: 25-50 mg at bedtime; pediatric, over 2 years: 0.5-1 mg/kg (15-30 mg/m²) or 12.5-25 mg at bedtime.

Motion sickness.

Adults: 25 mg b.i.d. Pediatric, over 2 years: 12.5-25 mg b.i.d.

Analgesia adjunct.

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(*Phenergan*)

Adults: 50 mg with an equal amount of meperidine and an appropriate dose of an atropine-like agent.

Pediatric, over 2 years: 1.2 mg/kg with an equal amount of meperidine and an atropine-like agent.

•**IM, IV *Hypersensitivity reactions.***

Adults: 25 mg repeated in 2 hr if needed; pediatric, 2-12 years: 12.5 mg or less, not to exceed half the adult dose. Resume PO therapy as soon as possible.

Antiemetic.

Adults: 12.5-25 mg q 4 hr if needed. If used postoperatively, reduce doses of concomitant hypnotics, analgesics, or barbiturates. Pediatric, 2-12 years: Do not exceed half the adult dose. Do not use when the cause of vomiting is unknown.

Sedation.

Adults: 25-50 mg at bedtime. May be combined with hypnotics for pre- and postoperative sedation.

Pediatric, 2-12 years: Do not exceed half the adult dose.

Sedation during labor.

Adults: 50 mg during early stages of labor, not to exceed 100 mg/24 hr.

Analgesia adjunct.

Adults: 25-50 mg in combination with reduced doses of analgesics and hypnotics; give atropine-like drugs as needed. Pediatric, 2-12 years: 1.2 mg/kg in combination with an equal dose of analgesic or barbiturate and an appropriate dose of an atropine-like drug.

END OF INFORMATION – NOTHING FOLLOWS